

Indiana State Department of Health

# State Early Childhood Comprehensive Systems Initiative

#### Goal:

 Plan and implement a more comprehensive and coordinated system of services for young children and their families

#### • Funding:

- Two years of planning funding
- Three years of implementation funding



## State Early Childhood Comprehensive Systems Initiative

- Five Components:
  - Medical Home
  - Early Care and Education
  - Mental Health & Social/Emotional Development
  - Family Support
  - Parent Education

#### Medical Home

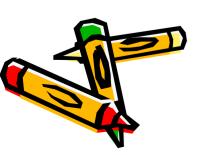
- Ongoing Assessment of Child Development
- Elicit and Address Parent Concerns
- Anticipatory Guidance
- Preventive Health Care
- Acute and Chronic Health Care
- Integration with Community Resources for



#### Early Care and Education

- Deliberate Opportunities for Cognitive, Physical,
   Social and Emotional Learning
- Training on Child Health and Development
- Training on Maintaining a Safe and Healthy Early Care Environment
- Parent Education/Anticipatory Guidance
- Child Observation to Identify Possible Physical/Emotional Health Problems
  - Linkage to Community Resources

- Mental Health and Social/Emotional Development
  - Positive Parent-Child Interactions
  - Infant Mental Health Consulting in Early Childhood education Programs
  - Part C (First Steps)



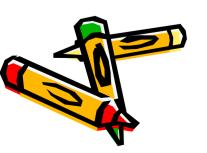
#### Family Support

- Home Visiting
- Housing Services
- Adult Education
- Job and Life Skills Training
- Marriage and Family Counseling
- Case Management



#### Parent Education

- Anticipatory Guidance from Physician
- Anticipatory Guidance from Early Childhood Education Provider
- Child Birth Classes
- Advice from Friends and Family
- Parenting Information from Media Sources



#### Opportunities

- Focus on early childhood is not new
- Renewed focus as a result of:
  - New knowledge about brain development
  - Research studies on the role of early experience
  - Potential economic and social impact
- A confluence of efforts across programs, agencies and service sectors



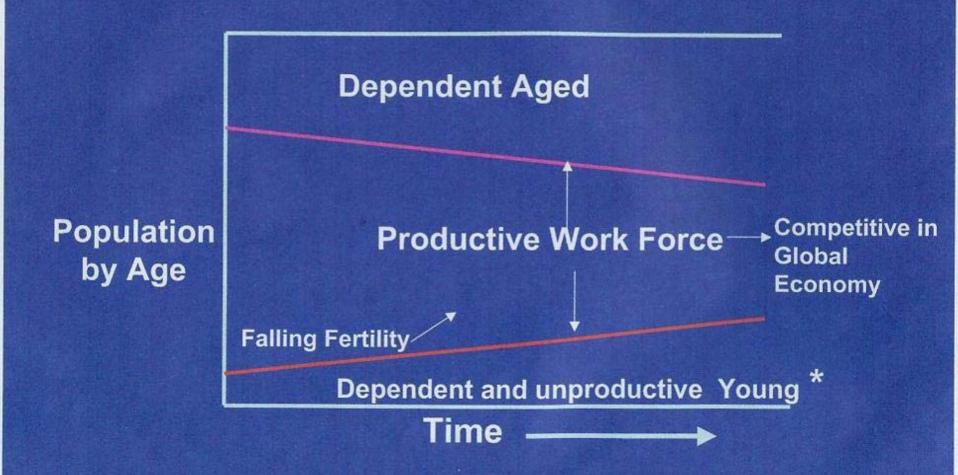
## Sub-optimal Child Development: What is at Stake

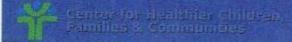
- Mental health issues across the lifespan
- Child abuse and neglect with long term consequences
- Poor literacy, retention rates, educational outcomes, drug use, dependency
- Crime and its cost to society
- Increasing prevalence of preventable medical conditions
- SES disparity in range of outcomes, beginning early in life and compounded over time
- Demographic, technology and genomics changes will present new risks and will exacerbate vulnerabilities and disparities

## Sub-optimal Child Development: What is at Stake

- School failure and additional costs due to expenditures for supplemental programs
  - Special education
  - Mental health, juvenile justice
- Diminished potential to form strong social and family relationships
- Long term costs in social dependency
- Sub-optimal productivity economic and social
  - Sub-optimal health

## Implications for US Future Economic Growth & Prosperity







#### **Current Challenges**

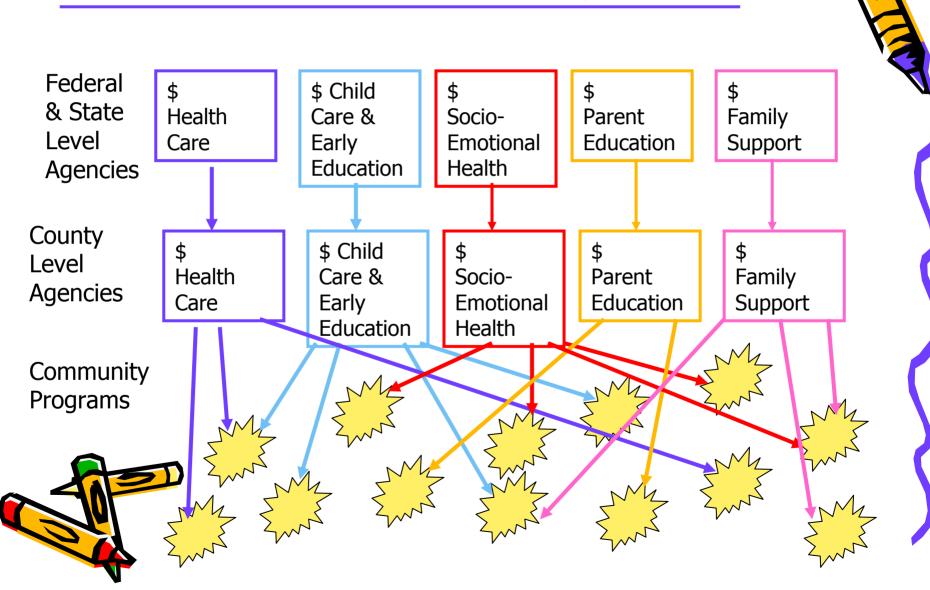
- Continuing poor health and developmental outcomes and their impact on educational, social, and economic outcomes
- Current systems challenged to meet child and family needs
- Major societal challenges have origins in pathways that are established in early childhood

#### **Current Challenges**

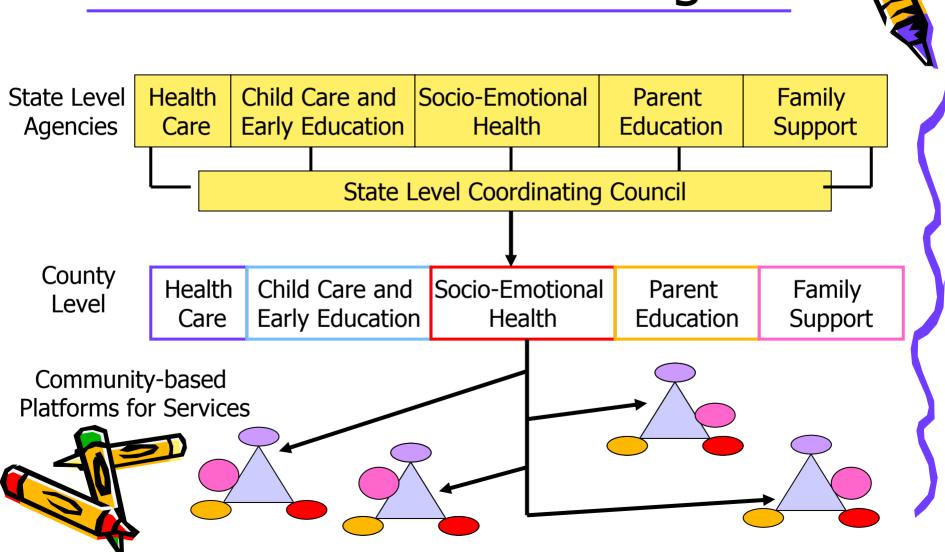
- Focusing solely on treatment of established problems is both unsustainable and largely ineffective
- Complex patchwork of existing programs
- Different intervention models, priorities and administrative mechanisms across service sectors



#### Where Are We Now?



### Where Are We Going



## **Policy Strategies**

- Integrated interventions to improve outcomes in multiple domains
- Shift service delivery away from narrow single issue programs towards integrated services that are multi-sector, multi-agency, multi-level and are focused on Family Centered Community Building



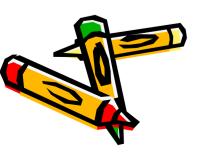
# Family Centered Community Building

 A community that can provide the resources, relationships and capacities to allow families to realize their potential, satisfy needs and continuously develop and enhance their capacity to provide a nurturing environment for the development of all their members



# Family Centered Community Building: Principles

- Takes families and communities into account and recognizes their interconnectedness
- Based on strengthening developmental assets of the family in a community
- Strengthens the community's ability to empower the family
- Strengthens the family's ability to strengthen the individual



# Family Centered Community Building: Principles

- Improves the lives and well-being of individuals, families, and the country as a whole utilizing a multilevel approach
- Develops and enhances investments in human capital, social capital and community economic and social infrastructure and institutions



# Family Centered Community Building: Principles

- Recognizes that families and communities are complex systems whose developmental paths are interacting and interdependent
- Acknowledges that families and communities are learning organizations that process and encode information in the nature and quality of the relationships that develop between individuals, between families and between families and community institutions



## Readiness to Learn Trajectory Service sectors and Programs that influence school readiness



Health

Ongoing well child care, acute, developmental and preventive care

Pre/perinatal care

**Education:** 

Early Intervention Programs (including Head Start and Early Head Start)

Pre-school

Social & Family Services:

Parenting and Family Literacy Programs

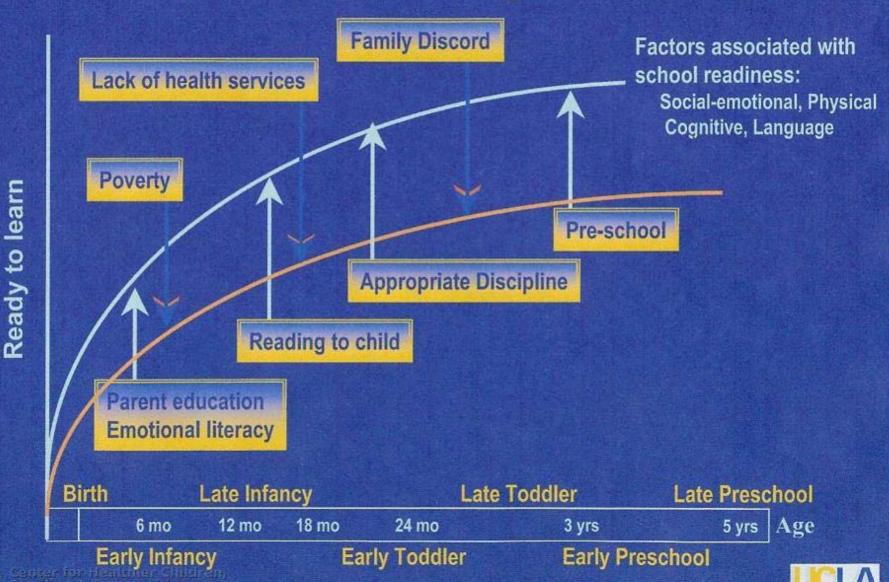
Center and Home Based Family Resource Programs

Child Care Programs





## Strategies to Improve School Readiness Trajectories

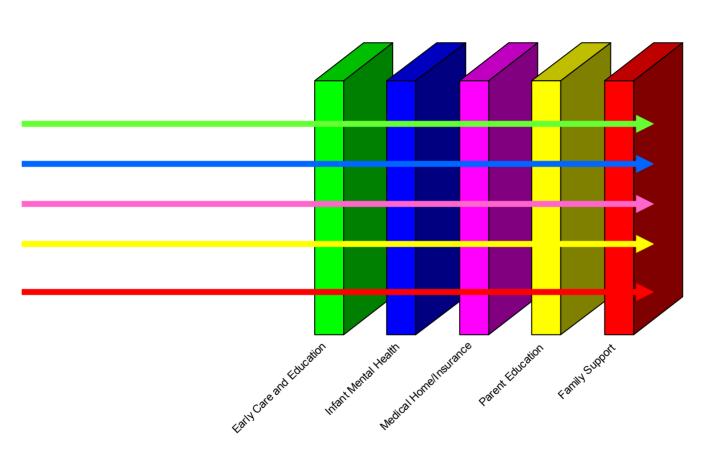


#### **General Strategies**

- Develop formal strategic planning process based on evidence of needs and what works
- Apply a systems perspective
- Insure that new investments are strategic and leveraged and that existing funding is made more flexible and sustainable
- Build in accountability and outcomes monitoring
- Utilize a developmental perspective to organize service, assessments, evaluation,

and monitoring

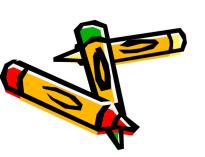
#### Goal: Healthy Children - Ready To Learn

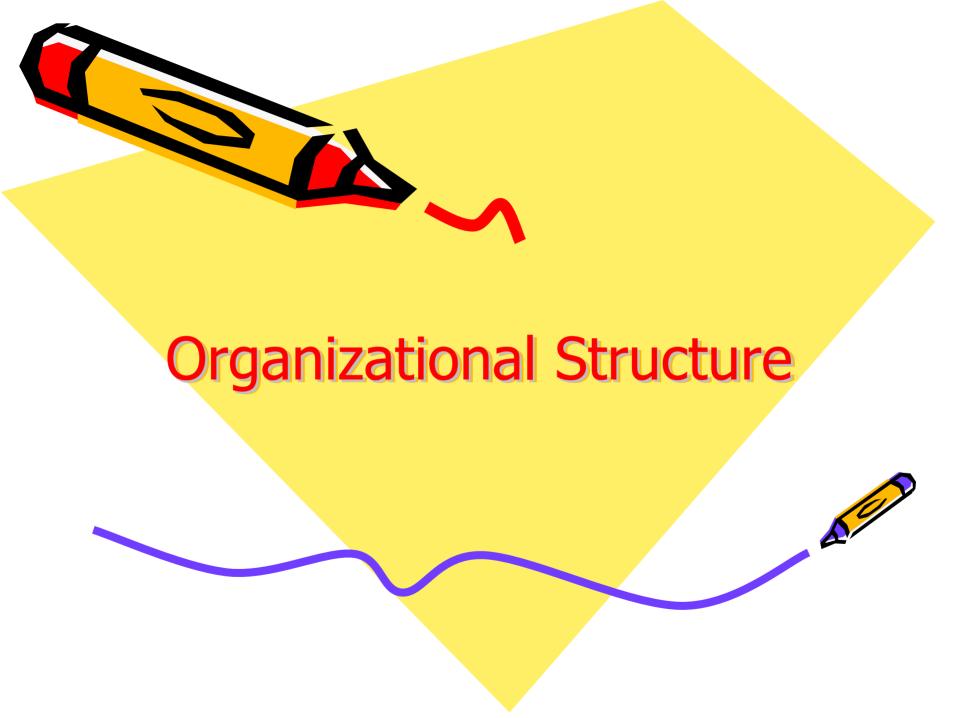




Infrastructure: Financing, Training, Communication

- Focus Groups in January and February, 2003
- Identification of:
  - Existing resources
  - Planned resources
  - Gaps in services
- Development of a planning process
- Development of tasks and timelines







Health Insurance Medical Home Early Childhood Mental Health Family Support

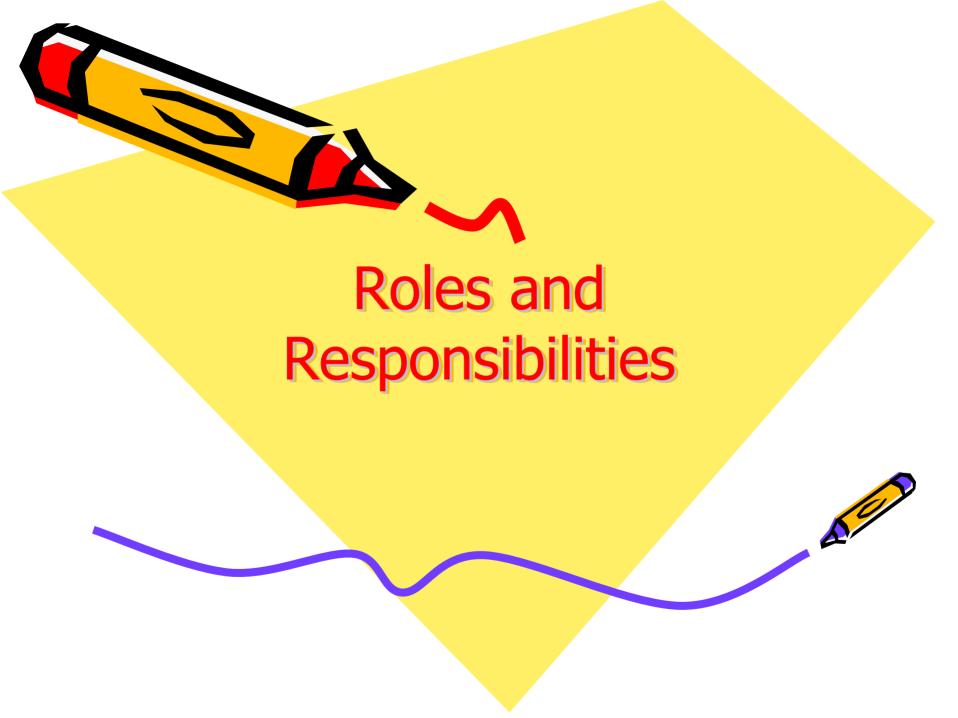
Early Care and Education Child Care

Parent Education

Fiscal Agent: ISDH

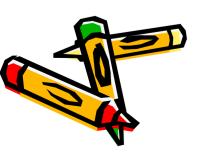
Project Director: Judy Ganser, MD Project Manager: Andrea Wilkes





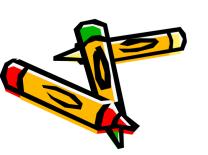
#### Steering Committee

- Establish vision, mission and values that will provide focus for the planning process
- Provide direction for the subcommittees
- Based on the work of the subcommittees and public forums, develop a strategic plan for Indiana's early childhood comprehensive system



#### Subcommittees

- Subcommittees will align with the five component areas
- Identify critical issues and gaps in services
- Provide recommendations to the Steering Committee related to the development of the strategic plan



#### **Parents**

- Parents will have membership on the Steering Committee and all subcommittees
- Ten percent of planning budget is dedicated to support their participation
- Family mentorship program



- Core Partner Meetings, February, March, 2004
  - Overview
  - Draft Vision Statement
  - Draft Outcomes
  - Charge to Work Groups



- Work Groups in May, June, 2004
- Key Questions for Critical Issues in Each Component
  - What are we doing?
  - What is working well?
  - What are the challenges?



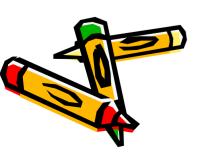
Work Groups (continued)

- Review Vision Statement, Standards and Outcomes
- Determine Indicators for Outcomes



Next Steps:

- Core Partners: June 29,2004
  - Subcommittee Reports
  - Outcome Indicators



- Next Steps:
- Community Dialogues August
- Subcommittee Meeting September
- Strategic Plan Drafted by Core Partners Fall
- Subcommittee Meeting to review Draft Plan Late Fall
- Strategic Plan Public Hearings Early 2005
- Community Dialogues

